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Bib Data Sheet

CONFIRMATION NO. 6567

SERIAL NUMBER 10/042,095	FILING DATE 01/07/2002 RULE	CLASS 705	GROUP ART UNIT 3621	ATTORNEY DOCKET NO. AUS920010598US1
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APPLICANTS

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** CONTINUING DATA *****
none

** FOREIGN APPLICATIONS *****
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 02/06/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY TX	SHEETS DRAWING 6	TOTAL CLAIMS 28/13	INDEPENDENT CLAIMS 8/3
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ADDRESS

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TITLE

PDA password management tool

FILING FEE RECEIVED 1136	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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